

Virginia Reentry Policy Academy Pilot Programs

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- The National Governors Association (NGA) Center for Best Practices announced that Virginia was one of seven states selected to participate in its Prisoner Reentry Policy Academy.
- Virginia's Policy Academy project team brought together representatives of the agencies and organizations that deliver services to ex-offenders and their families.
- NGA assisted state teams in developing effective prisoner reentry strategies designed to strengthen public safety and reduce costly recidivism rates by improving pre-and post-release services.

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- Virginia Reentry group has met together and as sub-committees to identify the specific causes for reentry failure in the state and develop strategies to address these.
- The overall reentry group identified and prioritized reentry barriers and needs.
- Four subcommittees were then established based on broad categories of need or barriers to successful reentry.

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- **Financial Obligations, Housing and Financial and Community Resources**
- **Family & Community Reintegration**
- **Employment and Education**
- **Health, Mental Health, and Substance Abuse**

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- Each subcommittee identified roadblocks to successful reintegration.
- Sub-committees developed workplans that included and proposed actions to address those.
- Together the workplans form the Virginia Reentry Project recommendations.

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- Pilot programs will be conducted in five localities.
- These pilot programs will allow for testing and evaluating implementation of the recommendations developed from Virginia's participation in the NGA Policy Academy on Prisoner Reentry.
- Pilot localities were selected on a volunteer basis.

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- Directors of local departments of social services will serve as conveners for reentry councils in the pilot localities . Reentry Councils will be composed of representatives of public and private agencies, businesses, community-based service providers and faith-based organizations.
- Local councils will develop a reentry plan for their locality that identifies resources available, methods for interagency coordination, integrated service delivery and implementation of policy academy recommendations.

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- Each locality will have an assigned state correctional facility from which a minimum of 25 and a maximum of 50 offenders will be referred for participation in the pilot program.

Correctional Centers

Greensville Correctional Center

Coffeewood Correctional Center

Haynesville Correctional Center

Powhatan Correctional Center

Fluvanna Correctional Center

Pilot Localities

Norfolk/Greensville-Emporia

Culpeper

King G.& Planning District*

Richmond

Culpeper/Richmond/Norfolk

*Spotsylvania, Stafford, Fredericksburg, Caroline

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Pilot projects will be characterized by:

- Community collaboration
- Integrated service delivery
- Connection to positive family & community support

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- Information about services and obligations that effect them and their families during their time of incarceration.
- Representatives of the correctional facility and the local reentry council will meet with the offender and develop plans for their return to the community.

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- In the 12 months following release there will be ongoing contact with a representative (s) of the local reentry council.
- Councils will develop methods for on-going communication and support for the returning ex-offender and established outcomes will be measured.

Employment

Family/Community Relationships

Housing

Health/Mental Health/SAS

Financial Obligations

Recidivism

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- **Pilots will include family to family mentoring during the re-entry process and for 12 months following release.**

- **Team Approach**

Mentor Couples or Two-person Teams

- **Family to Family Mentor Training**

Mentor Sponsor Organization

Mentor Supervisor

Mentors

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As well as relationship building and support, mentors will promote and facilitate ex-offender and family member skills building.

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- **Fatherhood/Motherhood**

The goal is to improve the emotional, social, mental and physical health of children through positive father/mother involvement. The focus is to get and keep fathers/mothers involved with their children and to improve the quality of their relationships.

- **Parenting**

Assist parents to enhance their parenting skills

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- **Strengthening Relationships**

 - Communication**

 - Conflict resolution**

 - Problem Solving**

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■ Education

Support ex-offender and family members in achieving education goals

Facilitate communication between home and school

Facilitate links with education resources in community– Race to the GED, etc

- Of those released from Virginia correctional facilities last year, 52% entered prison without a high school diploma or GED.

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- **Financial Literacy**

Assist ex-offender and family members in strengthening skills in the management of personal financial affairs including income, financial obligations, banking, savings, consumer protection, Earned Income Tax Credit

- **Department of Correctional Education data shows 37% of those leaving Virginia prisons report money and credit a post-release problem and 21% report is somewhat of a problem.**

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Reentry of Prisoners with Special Needs

The Greenville-Emporia Reentry Pilot will examine the issue of ex-offenders with special needs returning to the community. Sam Bush, Director of the Greenville/Emporia Department of Social Services will provide leadership in addressing this issue.

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Prisoner reentry into communities is in itself a challenging undertaking. These individuals have many obstacles to overcome if they are to return to the general community population and acquire the skills to succeed in their goal to live a normal productive life.

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Like the rest of society, there exists an increasing population within our prisons that have “special needs.” Greenville Correctional Center has a significant number of these “special needs” inmates.

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These “special needs” inmates can be categorized into groups based upon the type of care they will require upon their release.

- Hospital Care – Inmates that will require short or long term hospitalization.
- Nursing Home Care – Inmates whose medical condition would not permit them to function outside of a nursing home setting.

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- Assisted Living Facility Care – Inmates whose physical disabilities would not permit them to function outside of an assisted living facility.
- Dialysis Patients – Inmates who are dependent upon receiving dialysis treatment on a regular basis.

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As the prison population ages, there will be an increasing demand on the Department of Corrections to plan for prisoner reentry for these “special needs” inmates.

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The Greensville/Emporia Reentry Pilot wants to focus on these “special needs” inmates by:

Development of a successful assessment plan identifying the level of care the “special needs” inmate will require upon release.

The introduction of Medicaid Eligibility workers into the prison system where large numbers of these “special needs” inmates are located, i.e. facilities that have hospitals, dialysis units or special geriatric units.

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Hopefully, the Greensville/Emporia Reentry Pilot will provide a statewide model for serving “special needs” prisoners. At the time of their release to have their own specific “special needs” plan identifying the correct type of care they will require and have their Medicaid and Social Security eligibility approved.

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- Most incarcerated men and women return to communities and to families.
- Better reentry preparation, integrated service delivery and a support system of people that care will help decrease reentry barriers and help increase the opportunity for those returning to experience restoration within and without and to be contributing member of the communities to which they return.